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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/699,396	
	Filing Date	October 30, 2003	
	First Named Inventor	Derek METCALF	
	Art Unit	3634	
	Examiner Name		
Total Number of Pages in This Submission		Attorney Docket Number	38949/293059

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>1. Form PTO/SB/08 (one sheet)</b> <b>2. 3 publications</b>
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Leroy M. Toliver, Reg. No. 50,409
Signature	
Date	5/18/2005

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Angela M. Rossi		
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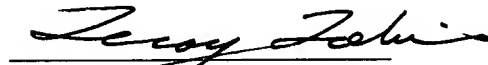
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Date: MAY 18, 2005

This Information Disclosure Statement is being filed before the issuance of a first office action on the merits of the application (37 C.F.R. 1.97(b)(3)); therefore, no fee is believed to be due. This Information Disclosure Statement is also being filed pursuant to (37 C.F.R. 1.97(e)). Applicants, through the undersigned representative, certify that each item of information contained in this paper was first cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to filing this paper. Applicants believe that no fee is due for consideration of this paper. If a fee is due, the Commissioner is authorized to charge such fee and any additional fees that may be due or credit any overpayment to Deposit Account No. 11-0855.

Respectfully submitted,



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Sheet	1	of	1
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**Complete if Known**

Application Number	10/699,396
Filing Date	October 30, 2003
First Named Inventor	Derek METCALF
Group Art Unit	3634
Examiner Name	
Attorney Docket Number	38989/293059

## U.S. PATENT DOCUMENTS

Examiner  
Initials

Cite No.<sup>1</sup>

Document Number

Number - Kind Code<sup>2</sup> (if known)

Publication Date

Name of Patentee or Applicant of Cited Document

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Initials\*Cite No.<sup>1</sup>

Foreign Patent Document

Country Code<sup>3</sup> - Number<sup>4</sup> - Kind Code<sup>5</sup> (if known)Publication Date  
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7

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## Europe

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